

**Agreement between the Township of Hamilton
and the CWA Local 1042 (White Collar)
(July 1, 2013 through December 31, 2018)
(Non-Police and Fire Collective Negotiations Agreement
Summary Form)**

New Jersey Public Employment Relations Commission
NON-POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1	Public Employer:	Township of Hamilton	County:	Mercer
2	Employee Organization:	White Collar Employees - CWA Local 1042	Number of Employees in Unit:	146
3	Base Year Contract Term:	Jul 2008 - June 2013	New Contract Term:	Jul 2013 - Dec 2018

SECTION II: Type of Contract Settlement (please check only one)

- 4 Contract settled without neutral assistance
 5 Contract settled with assistance of mediator
 6 Contract settled with assistance of fact-finder
 7 Contract settled with assistance of super-conciliator
 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?
 Yes No

SECTION III: Salary Base

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ 8,967,788
10	Longevity Costs in Base Year	\$ 135,647
11	Total Salary Base	\$ 9,103,435

SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	7/1/2013	1/1/2014	1/1/2015	1/1/2016	7/1/2016
13 Cost of Salary Increments (\$)	0	1,283	1,299	1,052	1,063
14 Salary Increase Above Increments (\$)	0	110,814	112,120	90,882	91,791
15 Longevity Increase (\$)	-8,313	-3,419	1,376	-3,756	-3,756
16 Total \$ Increase (sum of lines 13-15)	-8,313	108,678	114,875	88,178	89,097
17 New Salary Base (\$)	287,115	395,115	510,668	598,846	687,943
18 Percentage increase over prior year	-.09 %	1.21 %	1.26 %	.96 %	.96 %

*If contract duration is longer than five years, please add an additional page.

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SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	1/1/2017	7/1/2017	1/1/2018	7/1/2018	
13 Cost of Salary Increments (\$)	1,073	1,084	1,369	1,386	
14 Salary Increase Above Increments (\$)	92,708	93,636	118,215	119,693	
15 Longevity Increase (\$)	6,073	-3,473	3,175	1,875	
16 Total \$ Increase (sum of lines 13-15)	99,855	91,247	122,758	122,953	
17 New Salary Base (\$)	787,797	879,044	1,001,802	1,124,756	
18 Percentage increase over prior year	1.07 %	.96 %	1.28 %	1.27 %	.

*If contract duration is longer than five years, please add an additional page.

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	Overtime	214,698	0	2,684	2,717	2,201	2,223
	Sick Time Buyback	80,730	0	1,009	1,022	828	836
20	Totals(\$):	9,160,587	9,160,587	9,275,094	9,391,033	9,484,943	9,579,793

*If contract duration is longer than five years, please add an additional page.

SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 2,054,456	\$ 1,853,526
22	Prescription Plan Cost	\$ 549,628	\$ 505,907
23	Dental Plan Cost	\$ 163,690	\$ 164,147
24	Vision Plan Cost	\$ 14,043	\$ 14,043
25	Total Cost of Insurance	\$ 2,791,817	\$ 2,537,623
26	Employee Insurance Contributions	\$ 0	\$ 144,776
27	Employee Contributions as % of Total Insurance Cost	0	% 5.7

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	Overtime	214,698	2,245	2,268	2,863	2,899	
	Sick Time Buyback	80,730	844	853	1,077	1,090	
20	Totals(\$):	9,160,587	9,675,591	9,772,346	9,894,501	10,018,182	

*If contract duration is longer than five years, please add an additional page.

SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 2,054,456	\$ 1,853,526
22	Prescription Plan Cost	\$ 549,628	\$ 505,907
23	Dental Plan Cost	\$ 163,690	\$ 164,147
24	Vision Plan Cost	\$ 14,043	\$ 14,043
25	Total Cost of Insurance	\$ 2,791,817	\$ 2,537,623
26	Employee Insurance Contributions	\$ 0	\$ 144,776
27	Employee Contributions as % of Total Insurance Cost	0	% 5.7 %

Section VI: Medical Costs (continued)

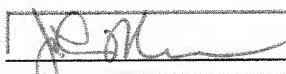
- 28 Identify any insurance changes that were included in this CNA.

SECTION VII: Certification and Signature

- 29 The undersigned certifies that the foregoing figures are true:

Print Name: John F. Ricci

Position/TITLE: Business Administrator

Signature: 

Date: 9/15/2017

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

Revised 8/2016